

Autopsies

WHY AUTOPSY?

- Autopsy establishes the cause, and often the manner, of death.
- Autopsy aids in uncovering unsuspected causes of death, as well as unknown contributing causes of death, and unknown underlying disease processes that may be present.
- The autopsy provides a complete picture of the cause of death, as well as eliminating suspected causes that prove to be unfounded.
- An autopsy performed by a qualified Forensic Pathologist will correctly identify a homicidal death, as well as rule out a homicidal death, for the protection of society in the event of a crime and the protection of the innocent in the case of the wrongly accused.
- The number of unsuspected or unexpected findings uncovered by an autopsy has not declined, despite appreciable advances in diagnoses and treatment.
- Underlying disease processes are seldom known without an autopsy.
- Improves the quality of medical care by bringing unsuspected conditions to the attention of physicians.
- Verify diagnoses or learn from mistakes (medicine is, as yet, an imperfect art).
- Several studies have shown a wide variance between stated causes of death from clinical data and autopsy reports (approximately 42 percent were inaccurate, based on clinical data).
- Helps to refine medical techniques and provides a deeper understanding of many maladies.
- Autopsy is valuable when using new diagnoses or encountering new diseases; also the nature and patterns of diseases tend to vary over time.
- Uncovers old diseases that sometimes go unrecognized due to long periods of near eradication.
- Helps physicians to refine new treatments and therapies.
- Autopsy findings can and have saved kin from the ravages of unsuspected hereditary or infectious diseases. (The genuine reason for autopsy is to aid and assist the living.)

- Uncovers new causes of death, such as those involving chemicals, manmade materials and unknown diseases.
- Many times the cause of death given on the death certificate is something expedient rather than a cause of death from autopsy findings.
- If a doctor is unfamiliar with the complete medical history of a patient, he might often fail to list underlying diseases.
- Inaccuracies of causes of death lead to over- and underemphasis in disease research.
- Errors in clinical diagnosis are made twice as often for people over the age of 70 as under 70, which shows that advanced age should not preclude autopsy. Much is to be learned in gerontology care and assessment.
- Autopsy is the final audit in health care.

The autopsy involves external examination of the body, along with a surgical-like procedure where the internal organs are examined. Minute portions of organ tissue are taken and processed onto micro thin slides which can be observed and studied through a microscope (histology - cytology).

Samples of body fluids, such as blood, bile, urine, spinal fluid, etc., may be taken and tested to further aid in determining cause and manner of death.

The forensic autopsy is the procedure most commonly associated with the Medical Examiner. However, it is only one of the tools that is used in the investigation of death. Many other investigative procedures are utilized which may include consulting experts in the areas of dentistry, anthropology, radiology, entomology, toxicology, ballistics and others.

As a routine part of a Medical Examiner's investigation into death, other areas may be covered in order to gather a clear and accurate picture of the events leading up to or having a bearing on the cause and manner of death. Contacts are routinely made with hospitals, doctors, law enforcement agencies, employers, neighbors, relatives, friends and any others who may be able to provide pertinent or necessary information.

The Medical Examiner's Office arrives at a conclusion of cause and manner of death by independent investigation and is an agency separate from law enforcement, district attorney's office and the medical community.